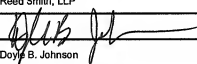


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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/042,485
	Filing Date	January 8, 2002
	First Named Inventor	Shekai Lee, et al.
	Art Unit	3629
	Examiner Name	Cang G. Thal
Total Number of Pages in This Submission	25	Attorney Docket Number 352738.00300

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Reed Smith, LLP	
Signature		
Printed name	Doyle B. Johnson	
Date	March 16, 2007	Reg. No. 39,240

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	Date

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120.

Complete If Known

Application Number 10/042,485
 Filing Date January 8, 2002
 First Named Inventor Saikel Lee, et al.
 Examiner Name Cang G. Thai
 Art Unit 3629
 Attorney Docket No. 352738.00300

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number 50-2803

Deposit Account Name REED SMITH LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	790	2001	395			Utility filing fee	
1002	350	2002	175			Design filing fee	
1003	550	2003	275			Plant filing fee	
1004	790	2004	395			Reissue filing fee	
1005	200	2005	100			Provisional filing fee	
SUBTOTAL (1)							\$0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	31	**31	=	0	X	50.	=	0
Independent Claims	10	**10	=	0	X	200.	=	0
Multiple Dependent			=		X		=	0

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25			Claims in excess of 20
1201	200	2201	100			Independent claims in excess of 3
1203	360	2203	180			Multiple dependent claim, if not paid
1204	200	2204	100			** Reissue independent claims over original patent
1205	50	2205	25			** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)						0.

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	60	2052	25			Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	120	2251	60			Extension for reply within first month	120.
1252	450	2252	225			Extension for reply within second month	
1253	1020	2253	510			Extension for reply within third month	
1254	1,580	2254	795			Extension for reply within fourth month	
1401	500	2401	250			Extension for reply within fifth month	
1402	500	2402	250			Notice of Appeal	
1403	1,000	2403	500			Filing a brief in support of an appeal	
1451	1,510	1451	1,510			Request for oral hearing	
1452	500	2452	250			Petition to institute a public use proceeding	
1501	1,400	2501	700			Petition to revive - unwaivable	
1502	800	2502	400			Petition to revive - unintentional	
1503	1,100	2503	550			Utility issue fee (or reissue)	
1460	130	1460	130			Design issue fee	
1807	50	1807	50			Plant issue fee	
1806	180	1806	180			Petitions to the Commissioner	
8021	40	8021	40			Processing fee under 37 CFR 1.17 (q)	
1809	790	2609	395			Submission of information Disclosure Stmt	
1810	790	2810	395			Recording each patent assignment per property (times number of properties)	
1801	790	2801	395			Filing a submission after final rejection (37 CFR § 1.129(a))	
1802	900	1802	900			For each additional invention to be examined (37 CFR § 1.129(b))	
						Request for Continued Examination (RCE)	
						Request for expedited examination of a design application	

Other fee (specify) Publication Fee

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 120.

SUBMITTED BY

Name (Print/Type) Doyle B. Johnson
Signature

Registration No. (Attorney/Agent)

39,240

Telephone

415-659-5927

Date

March 15, 2007

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